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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/927,972	08/10/2001	Woodrow W. Grandy	TSYS-25,410	5997
33526	7590	03/08/2006	EXAMINER	
F. LINDSEY SCOTT LAW OFFICE OF F. LINDSEY SCOTT 2329 COIT ROAD SUITE B PLANO, TX 75075-3796			BLACK, LINH	
		ART UNIT		PAPER NUMBER
		2163		
DATE MAILED: 03/08/2006				

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)	
	09/927,972	GRANDY ET AL.	
	Examiner	Art Unit	
	LINH BLACK	2163	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) Responsive to communication(s) filed on 01 December 2005.
 2a) This action is FINAL. 2b) This action is non-final.
 3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) Claim(s) 1-17 and 28-31 is/are pending in the application.
 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
 5) Claim(s) _____ is/are allowed.
 6) Claim(s) 1-17 and 28-31 is/are rejected.
 7) Claim(s) _____ is/are objected to.
 8) Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) The specification is objected to by the Examiner.
 10) The drawing(s) filed on _____ is/are: a) accepted or b) objected to by the Examiner.
 Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
 Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
 11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
 a) All b) Some * c) None of:
 1. Certified copies of the priority documents have been received.
 2. Certified copies of the priority documents have been received in Application No. _____.
 3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date _____ | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

This communication is in response to the document dated 12/1/05. Claims 1-31 are pending in the application. Claims 1 and 29 are independent claims.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

Claims 1-14 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 20010029322), and further in view of Rensimer et al. (US 6154726).

As per claim 1, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330, 0585 (to provide services to its user community: patients, doctors, nurses, laboratories, health management organizations), 0604; authorizing access - fig. 6, items 250, 272, 276, pars. 0074, 0190, 0196-0198; a screen, capable of displaying a template/form capable of receiving entries of yes/no data - fig. 33, item 2612; pars. 0014, 0029, 0133,

0566, 0703; a plurality of templates/forms, each of the templates showing a plurality of relevant inquiries and capable of accepting data entry as yes/no entries by a user, said templates being accessible on the workstation or on a computer accessible by the workstation – pars. 0136, 0703-0705, 0721; providing the capability for a user to access a selected database or a selected template – fig. 6, item 260; par. 0196; a plurality of modifiers related to and associated with designated inquiries on at least a portion of the templates and at least a portion of the specific sub-templates showing more detailed inquiries related to the inquiries on the templates and sub-templates for the entry of additional data – fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); a retrievable database for storing and retrieving entered data from at least one of the templates, sub-templates and modifiers – fig. 6, item 260; pars. 0703, 0732-0734; a language program accessible by the workstation and capable of producing a language text report of the entered data – pars. 0701-0702; fig. 3, items 170, 172.

Iliff teaches a computerized medical diagnostic and treatment advice system including network access – the title, par. 0014; provide services to its user community: patients, doctors, nurses, laboratories, health management organizations – par. 0585. Thus, Iliff's teachings allow the health care professional user e.g. doctors, nurses,...to access a selected database or template (as cited above). Even though Iliff teaches that patient can access the MDATA system to learn more about certain diseases/seeking

medical diagnostic and treatment advice – par. – 0075, Iliff does not explicitly disclose “entering data obtained by a health care professional by observation, testing, examination”. However, the Examiner finds that the health care professionals can also access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter patients’ answers during the physical examination processes. And Iliff does not acknowledge that the health care professionals cannot enter patients’ answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art. Rensimer et al. (US 6154726) teach system and method for recording patient history data about on-going physician care procedures – the title; a system and method permits physicians and other medical staff personnel to record, accurately and precisely, the treatment or care given in a particular patient encounter – col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff’s teaching with Rensimer’s teaching to allow users including patients, doctors, nurses, or health care professionals to enter data received from the testings/examinations/observations of patients to the medical system to better recording patients’ history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients.

As per claim 2, Iliff teaches forms and modifiers – pars. 0703; fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of

the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood...")

As per claim 3, Iliff teaches wherein the workstation is programmed to display a database access display providing the capacity to select a template for a selected section of the database – pars. 0032, 0035, 0060.

As per claim 4, Iliff teaches

wherein the system is a system for entering medical data – pars. 0129, 0273, 0726.

As per claim 5, Iliff teaches

wherein the database access display enables the selection of a template selector for medical history, medical examination, medical course and medical discharge and related matters – pars. 0017, 0035, 0464.

As per claim 6, Iliff teaches

wherein the templates are capable of data entry by a yes/no entry on selected inquiries in each template inquiry – pars. 0136, 0703; fig. 33.

As per claims 7-9, Iliff teaches

select a sub-template for each of at least a portion of the template inquires, the sub-template including more detailed inquiries for the selected template inquiry to enable the user to enter more detailed data by yes/no entries – pars. 0136, 0274-0287, 0703, 0732 (subsequent form/template); fig. 10a, items. 472-480; fig. 33. However, Iliff does not explicitly disclose “entering data obtained by a health care professional by observation, testing, examination”. However, the Examiner finds that the health care professionals can also access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc... cannot use the form to enter patients’ answers during the physical examination processes. And Iliff does not acknowledge that the health care professionals cannot enter patients’ answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art.

Rensimer et al. (US 6154726) teach system and method for recording patient history data about on-going physician care procedures – the title; a system and method permits physicians and other medical staff personnel to record, accurately and precisely, the treatment or care given in a particular patient encounter – col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff’s teaching with Rensimer’s teaching to allow users including patients, doctors, nurses, or health care professionals to enter data received from the testings/examinations/observations of patients to the medical system to better record patients’ history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients.

As per claim 10, Iliff teaches wherein the language program produces an English language text report of the entered data – pars. 0009, 0202, 0675, 0739.

As per claim 11, Iliff teaches wherein the workstation is programmed to access additional databases – pars. 0196, 0237, 0560.

As per claim 12, Iliff teaches receive, distribute or direct distribution of all or selected portions of the entered data to at least one identified recipient or database – pars. 0273, 0739, 0750.

As per claim 13, Iliff teaches store the entered data and maintain a record of distribution of the entered data – pars. 0035-0036, 0083.

As per claim 14, Iliff teaches wherein the selected portions of the data are distributable automatically to the identified recipients or databases according to programmed instructions – pars. 0009, 0216, 0413.

Claims 15-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Florance et al. (US 6871140).

As per claims 15 and 17, Iliff and Rensimer et al. do not explicitly suggest a single sentence report. However, in any field of services or businesses, a single sentence report or plural sentences report are well known, it depends on the users' needs. Florance et al. teach one-line, multi-lines reports – col. 54, lines 17-21. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff and Rensimer et al.'s teachings with Florance et al.'s teaching in order to efficiently provided needed information to users.

As per claim 16, Iliff teaches forms and modifiers – pars. 0703; fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); Iliff also teaches the problem screening questions to determine patients' level of sickness or if patients need immediate attention - pars. 0274-285. Thus, users' entries to answer questions inherently allowed modifiers' adjectives to be modified such as severe headache/vomiting or little headache/vomiting etc...

Claims 27-31 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Maes et al. (US 20020002502).

As per claims 27 and 28, Iliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer-based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer et al.'s teaching with Maes et al.'s teaching in order to provide users an efficient way to quickly answer/indicate a negative selection/response.

As per claims 29-31, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330, 0585 (to provide services to its user community: patients, doctors, nurses, laboratories, health management organizations), 0604; authorizing access - fig. 6, items 250, 272, 276, pars. 0074, 0190, 0196-0198; a screen, capable of displaying a template/form capable of receiving entries of yes/no data - fig. 33, item 2612; pars. 0014, 0029, 0133, 0566, 0703; a plurality of templates/forms, each of the templates showing a plurality of relevant inquiries and capable of accepting data entry as yes/no entries by a user, said templates being accessible on the workstation or on a computer accessible by the workstation – pars. 0136, 0703-0705, 0721; providing the capability

for a user to access a selected database or a selected template – fig. 6, item 260; par. 0196; a plurality of modifiers related to and associated with designated inquiries on at least a portion of the templates and at least a portion of the specific sub-templates showing more detailed inquiries related to the inquiries on the templates and sub-templates for the entry of additional data – fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); a retrievable database for storing and retrieving entered data from at least one of the templates, sub-templates and modifiers – fig. 6, item 260; pars. 0703, 0732-0734; a language program accessible by the workstation and capable of producing a language text report of the entered data – pars. 0701-0702; fig. 3, items 170, 172.

Iliff teaches a computerized medical diagnostic and treatment advice system including network access – the title, par. 0014; provide services to its user community: patients, doctors, nurses, laboratories, health management organizations – par. 0585. Thus, Iliff's teachings allow the health care professional user e.g. doctors, nurses,...to access a selected database or template (as cited above). Even though Iliff teaches that patient can access the MDATA system to learn more about certain diseases/seeking medical diagnostic and treatment advice – par. – 0075, Iliff does not explicitly disclose "entering data obtained by a health care professional by observation, testing, examination". However, the Examiner finds that the health care professionals can also

access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter patients' answers during the physical examination processes. And Iliff does not acknowledge that the health care professionals cannot enter patients' answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art.

Rensimer et al. (US 6154726) teach system and method for recording patient history data about on-going physician care procedures – the title; a system and method permits physicians and other medical staff personnel to record, accurately and precisely, the treatment or care given in a particular patient encounter – col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23.

Iliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer's teaching with Maes et al.'s teaching to allow users including patients, doctors, nurses, or health care professionals

to enter data received from the testings/examinations/observations of patients to the medical system to better recording patients' history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients. In addition, not only that users can circle an answer indicating that is positive, users can also cross out an answer indicating a negative response to the question, thus, provide users an efficient way to quickly answer/indicate a negative/positive selection/response.

Response to Arguments

Applicant's arguments with respect to claims 1-31 have been considered but are moot in view of the new ground(s) of rejection.

Conclusion

THIS ACTION IS MADE FINAL. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee

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pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

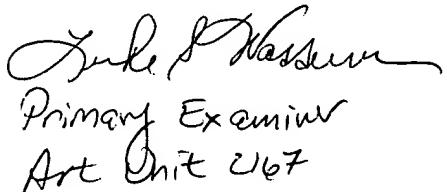
Any inquiry concerning this communication or earlier communications from the examiner should be directed to LINH BLACK whose telephone number is 571-272-4106. The examiner can normally be reached on 8am - 5pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Safet Metjahić can be reached on 571-272-4023. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).



LINH BLACK
Examiner
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Linh Black
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